

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF MICHIGAN**

**FEE
PAID
DET 139898**

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Lyle N Applewhite

v.

Stellantis

Jerrel Noland

Arunde Stentor

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case: 3:22-cv-10528

Judge: Cleland, Robert H.

MJ: Ivy, Curtis

Filed: 03-11-2022

CMP APPLEWHITE VS STELLANTIS ET AL (DP)

Jury Trial:

☒ Yes ☐ No
(check one)

Complaint for Employment Discrimination

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name Kyla Applewhite
 Street Address 2724 Parkway Circle
 City and County Sterling Heights Macomb
 State and Zip Code MI 48310
 Telephone Number (586) 204-3884
 E-mail Address k_nathaya23@yahoo.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name Stellantis
 Job or Title
 (if known)
 Street Address 21500 Mound Road
 City and County Warren Macomb
 State and Zip Code MI 48091
 Telephone Number (586) 497-0303
 E-mail Address
 (if known) Nancy.Kiri@stellantis.com

Defendant No. 2

Name Jerrel Noland
 Job or Title
 (if known) production supervisor
 Street Address 19977 Stutter St
 City and County Detroit Wayne
 State and Zip Code MI 48234
 Telephone Number (313) 333-6901
 E-mail Address
 (if known)

Defendant No. 3

Name Arunde Stanton
 Job or Title Area Manager
 (if known)
 Street Address 34415 Vinita St
 City and County Clinton Township Macomb
 State and Zip Code MI 48035
 Telephone Number (313) 269-3840
 E-mail Address _____
 (if known)

Defendant No. 4

Name _____
 Job or Title _____
 (if known)
 Street Address _____
 City and County _____
 State and Zip Code _____
 Telephone Number _____
 E-mail Address _____
 (if known)

C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is:

Name Stellantis - WTAP
 Street Address 21500 Mound Road
 City and County Norwell Macomb
 State and Zip Code MI 48041
 Telephone Number (584) 467-0203

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to *(check all that apply)*:

- ☒ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

- ☐ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)

- ☐ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

- ☐ Other federal law *(specify the federal law)*:

- ☐ Relevant state law *(specify, if known)*:

- ☐ Relevant city or county law *(specify, if known)*:

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

- ☐ Failure to hire me.
- ☐ Termination of my employment.
- ☐ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☐ Unequal terms and conditions of my employment.
- ☒ Retaliation.
- ☒ Other acts (*specify*): discrimination

(*Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.*)

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

June 14th 2021

C. I believe that defendant(s) (*check one*):

- ☒ is/are still committing these acts against me.
- ☐ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

- ☒ race called a nappy head a** b***h
- ☐ color _____
- ☒ gender/sex I am bi-sexual and was called a dyke b***h
- ☐ religion _____
- ☐ national origin _____
- ☐ age. My year of birth is _____. (*Give your year of birth only if you are asserting a claim of age discrimination.*)
- ☐ disability or perceived disability (*specify disability*) _____

MIED PT050 / (REV 3/10) COMPLAINT FOR EMPLOYMENT DISCRIMINATION

E. The facts of my case are as follows. Attach additional pages if needed.

I have been working for Stellantis since May 21st 2017 and is currently a production supervisor. On June 16th, Jerrel Noland (black male) a production supervisor discriminated against my sexual orientation and race. Present was our supervisor, Aronde Stanton (black male) ^{who he} made no effort to correct or address the commentary and several witnesses made a complaint, to where I was to address and resolve the matter ^{in order} to move forward. I expressed that I was uncomfortable, and was forced to handle the situation so they could move forward. I asked to support other areas because of the supervisor shortage, and I was experienced in those departments because I felt uncomfortable working with Jerrel and Aronde. My concerns were ignored and I was informed I couldn't choose whom I worked with. I had to interact with Jerrel when he covered Aronde's absence, but I avoided him on July 2nd, a TL had asked for some supplies and I informed them ^{that} they could order it from the tool store. Aronde called for a team meeting stating that I was not a team player and if no one wanted to work as a team ^{with} they could get the fuck on. I questioned Aronde ^{about} what was wrong with my response, he stated it was his show and informed myself I was not being a team player. Seeking answers for what occurred he stated I was going to another shift because I would not agree with him. I was sent to another shift per Aronde request, and took a medical leave. I felt attacked and suffered severe anxiety and depression.

I returned to work and was informed to remain in the same department. Kevin Inman informed myself that I was going to be reassigned to F2 where Jerrel was. I reached out to HR expressing my concerns she told myself that it should not be a problem because we were on different shifts. I explained to her that he would be my counterpart and that we would have to do a hand off and communicate. My concerns were ignored again, Kevin Inman was my direct report and I informed him I was emotionally unstable seeking counseling ^{and} ~~that~~ was not capable of dealing with Jerrel. Kevin Inman understood and remain on CI (my previous area before coming) to his shift. I reached out again to HR seeing if I could go back to my previous plant. She informed myself I was not releasable. I asked and inquired my file to review my hold seeking answers. HR has not followed up and continues to ignore my concerns.

On December 2021, I was informed that I am being reassigned again to where Jerrel was working. I expressed again how I was uncomfortable, and I would not mind being placed elsewhere just as long as I did not have to deal with Jerrel and Aronde. I am eligible for an promotion and have applied for several positions. I was informed that I would be denied because I am not releasable, still seeking answers and no response. I meet all qualifications and they will not respond to why I am not releasable. My plant has open positions but I applied for other locations to remove myself from the environment I still feel uncomfortable in.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

November 2021

- B. The Equal Employment Opportunity Commission (check one):

☐

has not issued a Notice of Right to Sue letter.

☒

issued a Notice of Right to Sue letter, which I received on (date)

December 14th 2021

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

☐

60 days or more have elapsed.

☐

less than 60 days have elapsed.

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages. Attach additional pages if needed.

i suffered anxiety and depression, my doctor advised counseling. i took a stress leave and was prescribed medication from my depression. i took counseling to help with both disorders. my stress levels was inconsistencies due to myself reliving the event. my current condition has put my progress on hold - currently with child - due June 9th 2022.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

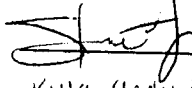
A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: March 10th, 2021.

Signature of Plaintiff

Printed Name of Plaintiff



Kyla Applegate

MIED ProSe 7 (Rev 5/16) Complaint for Employment Discrimination

Additional Information:

EEOC Form 161 (11/2020)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: **Kyla N. Applewhite**
12880 Metropolitan Parkway
Sterling Hts, MI 48312

From: **Detroit Field Office**
477 Michigan Avenue
Room 865
Detroit, MI 48226



On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

471-2021-03339

Alexa K. Moore,
Investigator

(313) 774-0022

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:



The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.



Your allegations did not involve a disability as defined by the Americans With Disabilities Act.



The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.



Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge



The EEOC issues the following determination: The EEOC will not proceed further with its investigation, and makes no determination about whether further investigation would establish violations of the statute. This does not mean the claims have no merit. This determination does not certify that the respondent is in compliance with the statutes. The EEOC makes no finding as to the merits of any other issues that might be construed as having been raised by this charge.



The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.



Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed **WITHIN 90 DAYS** of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission

Stephen VanKerckhove

Digitally signed by Stephen VanKerckhove

Date: 2021.12.14 15:47:16 -05'00'

Enclosures(s)

for **Michelle Eisele,**
District Director

(Date Issued)

cc:

Dee Williams
EEO Manager
STELLANTIS
1000 CHRYSLER DR
Auburn Hills, MI 48326

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC 471-2021-03339	
MICHIGAN DEPARTMENT OF CIVIL RIGHTS and EEOC <i>State or local Agency, if any</i>			
Name (indicate Mr., Ms., Mrs.) MS. KYLA N APPLEWHITE		Home Phone (586) 206-3884	
Street Address 12880 METROPOLITAN PARKWAY, STERLING HTS, MI 48312			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name STELLANTIS US, LLC		No. Employees, Members 501+	
Street Address 21500 MOUND RD, WARREN, MI 48091			
Name 		No. Employees, Members 	
Street Address 			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest 06-16-2021 08-11-2021 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): I began working for the above-named employer on or about May 21, 2014. I am currently employed as a Production Supervisor. On or about June 16, 2021, another Production Supervisor (Black, male) called me derogatory names based on my sexual orientation and my race. My supervisor was present, but made no effort to correct the harassment. I complained to Human Resources and was forced to have a conversation with my harasser. I informed Human Resources this made me uncomfortable and I no longer wanted to work with him. My concerns were ignored. On or about July 02, 2021, my supervisor transferred me to another shift. I believe this was an adverse action taken in retaliation for my internal complaint. I believe I was discriminated against due to my sex (sexual orientation, female), my race (Black) and in retaliation for engaging in a protected activity, in violation of Title VII of the Civil Rights Act of 1964, as amended.			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT	
Digitally signed by Kyla N Applewhite on 11-20-2021 10:18 AM EST		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

Kyla N Applewhite

(b) County of Residence of First Listed Plaintiff

OKLAHOMA

(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

DEFENDANTS

Stellantis
Sergei Kozlov
Alicia W. Stanton

County of Residence of First Listed Defendant

OKLAHOMA

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff
☒ 2 U.S. Government Defendant
☒ 3 Federal Question (U.S. Government Not a Party)
☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | | | | | | | | | | | |
|---|----------------------------|-----|----------------------------|-----|----------------------------|---|----------------------------|-----|----------------------------|-----|----------------------------|
| Citizen of This State | <input type="checkbox"/> 1 | PTF | <input type="checkbox"/> 1 | DEF | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business in This State | <input type="checkbox"/> 4 | PTF | <input type="checkbox"/> 4 | DEF | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | | <input type="checkbox"/> 2 | | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business in Another State | <input type="checkbox"/> 5 | | <input type="checkbox"/> 5 | | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | | <input type="checkbox"/> 3 | | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | | <input type="checkbox"/> 6 | | <input type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

CONTRACT <input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 160 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	TORTS PERSONAL INJURY <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Label & Murder <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice PERSONAL INJURY <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care <input type="checkbox"/> 368 Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	FORFEITURE/PENALTY <input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other LABOR <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act IMMIGRATION <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	BANKRUPTCY <input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark <input type="checkbox"/> 880 Defend Trade Secrets Act of 2016 SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1950) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIW (DIW 1405(g)) <input type="checkbox"/> 864 SSD Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS - Third Party 26 USC 7609	OTHER STATUTES <input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit (15 USC 1601 or 1692) <input type="checkbox"/> 485 Telephone Consumer Protection Act <input type="checkbox"/> 490 Cable-Sat TV <input type="checkbox"/> 850 Securities Commodities Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
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V. ORIGIN (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding
☐ 2 Removed from State Court
☐ 3 Remanded from Appellate Court
☐ 4 Reinstated or Reopened
☐ 5 Transferred from Another District (specify)
☐ 6 Multidistrict Litigation - Transfer
☐ 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):
 Brief description of cause: 42 U.S.C. 2000e to 2000e-17

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.C.V.P.
 DEMAND \$
 CHECK YES only if demanded in complaint:
 JURY DEMAND: ☒ Yes ☐ No

VIII. RELATED CASE(S) IF ANY

(See instructions)
 JUDGE:
 DOCKET NUMBER

DATE

October 15, 2020

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE

PURSUANT TO LOCAL RULE 83.11

1. Is this a case that has been previously dismissed?

☐ Yes
☒ No

If yes, give the following information:

Court: _____

Case No.: _____

Judge: _____

2. Other than stated above, are there any pending or previously discontinued or dismissed companion cases in this or any other court, including state court? (Companion cases are matters in which it appears substantially similar evidence will be offered or the same or related parties are present and the cases arise out of the same transaction or occurrence.)

☐ Yes
☒ No

If yes, give the following information:

Court: _____

Case No.: _____

Judge: _____

Notes :
